

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.H	1085	4/10
RESPONSE FORMALITY REVIEW	C.C	SC1114	7/20/01 9-27-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/9/04
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	0	0	
7	0	0	
8	✓	✓	
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15	✓	✓	
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If more than 150 claims or 10 actions  
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BRIEF STAPLE COPY

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